



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05)
Indiana Election Commission (IC 3-9-5-14)

(CFA-4)

Summary Sheet

FILE NUMBER

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this form, see instructions on the reverse side.

2014 JAN 1

TOTAL PAGES IN ENTIRE CFA-4 REPORT

IS THIS AN AMENDMENT? ☐ Yes ☒ No

PEGGY BEAVER
CLERK

2

COMMITTEE INFORMATION

1. Full Name of Committee (as on Statement of Organization) ☐ Check if this is a new name

Committee to Elect Daren Sink

2. Acronym or Abbreviated Name (if any)

Same

3. Committee Telephone Number

(317) 439-4300

4. Mailing Address (address where all campaign finance correspondence is received) ☐ Check if this is a new address

10544 Chestnut Hill Court

5. City, State, ZIP Code

Fishers, IN 46037

6. Party Affiliation (if applicable)

N/A

CANDIDATE INFORMATION (For Candidate's Committees Only)

7. Full Name of Candidate (include any nickname)

Daren J Sink

8. Party Affiliation or If Independent Candidate

N/A

9. Office Sought (Include district number, if any. Not required for exploratory committee.)

HSE School Board - Fall Creek Township

10. County of Residence Hamilton

TYPE OF REPORT

11. Check one:

☐ Pre-Primary ☐ Pre-Election ☒ Annual ☐ Nomination ☐ Other

☐ Final/Disbands Committee (lines 18, 19, and 20 must be "0") ☐ Outgoing Treasurer (within 10 days amend Statement of Organization)

CONVENTION CANDIDATES ONLY

Check one:

☐ Pre-Convention

☐ Post-Convention

12. Reporting Period:

From: 01/01/2013

Through: 12/31/2013

COLUMN A
This Period

COLUMN B
Year to Date

13. Cash on hand and investments at the beginning of this reporting period.

328

14. Cash on hand and investments January 1, current year.

978

CONTRIBUTIONS AND RECEIPTS

(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)

15a. Itemized (use Schedule A)

0

0

15b. Unitemized

0

0

15c. Add lines 15a and 15b in both columns

SUBTOTAL

0

0

16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B

TOTAL

328

978

EXPENDITURES

(Note: These amounts include in-kind expenditures and loan repayments.)

17a. Itemized (use Schedule B) (Public Question: use Schedule C)

60

710

17b. Unitemized

0

0

17c. Add lines 17a and 17b in both columns

SUBTOTAL

60

710

18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)

TOTAL

268

268

19. Debts OWED BY the committee (use Schedule D)

0

20. Debts OWED TO the committee (use Schedule E)

0

CERTIFICATION

I, Treasurer, BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.

Title

Date

1/10/2014

Date

1/10/2014

WARNING: Any information contained in this report may not be copied for sale or used for any commercial purpose. (IC 3-9-4-5) A person who knowingly files a fraudulent report commits a Class D felony. (IC 3-14-1-13) A person who fails to file a complete or accurate report as required by the Indiana Campaign Finance Law commits a Class B misdemeanor, (IC 3-14-1-14) and may be subject to civil penalties. (IC 3-9-4-16, IC 3-9-4-17, IC 3-9-4-18)

FOR OFFICE USE ONLY

PEGGY BEAVER
CLERK

2014 JAN 10 AM 8:56

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REPORT OF RECEIPTS AND EXPENDITURES
OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05)
Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE B)
ITEMIZED EXPENDITURES

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

FILE NUMBER

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RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
Code A Lockbox R Keltner Group, LLC P.O. Box 11588 Fort Wayne, IN 46859 - 1588	Creative Product Solutions (STICKERS,SIGNS ETC) N/A	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other Purpose:	\$634.54	\$634.54	11/8/2012
Code A Go Daddy 14455 N. Hayden Rd. Ste. 219 Scottsdale AZ 85260	Web Domain Host N/A	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other Purpose:	\$16.16	\$16.16	11/8/2012
Code O JP Morgan Chase, NA Olio and 116th 11610 Olio Rd Fishers, IN 46037	Bank N/A	<input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input checked="" type="checkbox"/> Other Purpose: Account Service Fee	\$15.00	\$15.00	09/30/2013
Code O JP Morgan Chase, NA Olio and 116th 11610 Olio Rd Fishers, IN 46037	Bank N/A	<input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input checked="" type="checkbox"/> Other Purpose: Account Service Fee	\$15.00	\$30.00	10/31/2013
Code O JP Morgan Chase, NA Olio and 116th 11610 Olio Rd Fishers, IN 46037	Bank N/A	<input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input checked="" type="checkbox"/> Other Purpose: Account Service Fee	\$15.00	\$45.00	11/29/2013
Code O JP Morgan Chase, NA Olio and 116th 11610 Olio Rd Fishers, IN 46037	Bank N/A	<input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input checked="" type="checkbox"/> Other Purpose: Account Service Fee	\$15.00	\$60.00	12/31/2013
Code <div></div>	<div></div>	<input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other Purpose:			
SUBTOTAL THIS PAGE OF SCHEDULE B			\$710		